DEPARTMENT OF HEALTH AND FAMILY SERVICES Division of Disability and Elder Services Printed 06/20/2006

Provider Inspection Summary

For the period 05/01/2003 to 04/30/2006 Adult Day Care Facility STATE OF WISCONSIN
Bureau of Quality Assurance
P.O. Box 2969
Madison WI 53701-2969

Facility Information

Facility Name: DAY BREAK ADULT CENTER (0008944) Address: 5030 HWY 70 WEST, EAGLE RIVER, WI 54521

License Status: REGULAR

Licensed/Certified/Registered 02/29/2000

Regional Office: NORTHERN REGION (RHINELANDER), (715) 365-2800

Survey	History
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Survey ID: 0094919 End Date: 04/19/2005 Type: ABBREVIATED Purpose: SURVEY

Results: STATEMENT OF DEFICIENCY ISSUED

Statement of Deficiency: #10009402

Deficiencies Cited Subject Area Subject Area Subject Area Corrected

II.d.(4) TRAINING-CONTINUING EDUCATION

III.b.(5) SAFETY-EMERGENCIES PLAN

Survey ID: 0090750 End Date: 06/18/2003 Type: STANDARD Purpose: SURVEY

Results: STATEMENT OF DEFICIENCY ISSUED

Statement of Deficiency: #10005203 Served 08/13/2003

Compliance Deficiencies Cited Verified Subject Area Corrected I.b.(4)HEALTH STATEMENT 04/19/2005 Yes III.b.(5)SAFETY-EMERGENCIES PLAN 04/19/2005 III.c.(4)FIRE ALARM & SMOKE DETECTORS 04/19/2005 Yes

Disclaimer: This information is provided as a public service by the Wisconsin Department of Health and Family Services (DHFS). The Department neither endorses any facility nor guarantees that this information is accurate, up-to-date, or complete. This information, which should not be used as a sole source in selecting a facility, does not replace official information sources.